

SEMINOLE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT: FY 2008/2009 Contract Between the State of Florida Department of Health and Seminole County

DEPARTMENT: Community Services

DIVISION: Administration - Community Services

AUTHORIZED BY: Joe Forte

CONTACT: Pamela Martin

EXT: 2302

MOTION/RECOMMENDATION:

Approval of the FY 2008/2009 Contract between Seminole County and the State of Florida Department of Health for Operation of the Seminole County Health Department and authorization for the Chairman of the Board of County Commissioners to execute the Contract in the amount of \$856,104.00.

County-wide

Joe Forte

BACKGROUND:

Each year Seminole County enters into a contract with the State of Florida Department of Health which specifies the funding and health services to be delivered to the residents of Seminole County. The Seminole County FY 2008/2009 appropriation is an amount not to exceed \$856,104.

This funding agreement is decreased \$161,789 from the FY 2007/2008 appropriated amount and is contingent upon the adoption of the proposed Budget FY 2008/2009.

STAFF RECOMMENDATION:

Staff recommends that the Board approve the FY 2008/2009 contract between the State of Florida Department of Health and Seminole County and authorization for the Chairman of the Board of County Commissioners to execute the contract in the amount of \$856,104.00.

ATTACHMENTS:

1. Contract

Additionally Reviewed By:

☐ County Attorney Review (Susan Dietrich)

**CONTRACT BETWEEN
SEMINOLE COUNTY
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE SEMINOLE COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2008-2009**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and Seminole County ("County"), through their undersigned authorities, effective October 1, 2008.

RECITALS

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Seminole County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.

2. TERM. The parties mutually agree that this Agreement shall be effective from October 1, 2008, through September 30, 2009, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.

3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility *(direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C)* as provided in Attachment II, Part II is an amount not to exceed \$ 7,037,445 *(State General Revenue, Other State Funds and Federal Funds listed on the Schedule C)*. The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility *(direct contribution excluding any fees, other cash or local contributions)* as provided in Attachment II, Part II is an amount not to exceed \$856,104 *(amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment)*.

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund
Seminole County
400 W. Airport Blvd.
Sanford, FL 32773

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (*This is the standard quality assurance "County Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site*).

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall

be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i.* The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
- ii.* The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii.* Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv.* The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Seminole County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of

surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated April 2005, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The

CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

- i.* March 1, 2009 for the report period October 1, 2008 through December 31, 2008;
- ii.* June 1, 2009 for the report period October 1, 2008 through March 31, 2009;
- iii.* September 1, 2009 for the report period October 1, 2008 through June 30, 2009; and
- iv.* December 1, 2009 for the report period October 1, 2008 through September 30, 2009.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2009, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

Mike Napier
Name

Administrator
Seminole County Health Dep't
Title

400 W. Airport Blvd.
Sanford, FL 32773
Address

(407) 665-3200
Telephone

For the County:

Joe Forte
Name

Deputy
County Manager
Title

1101 E. First Street
Sanford, FL 32771
Address

(407) 665-7212
Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

c. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 24 page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2008.

**BOARD OF COUNTY COMMISSIONERS
FOR SEMINOLE COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____

NAME: Brenda Carey

TITLE: Chairman, Board County
Commissioners

DATE: _____

ATTESTED TO:

SIGNED BY: _____

NAME: Maryanne Morse

TITLE: Clerk to the Board of County
County Commissioners of
Seminole County, Florida

DATE: _____

SIGNED BY: _____

NAME: Ana M. Viamonte Ros, M.D., M.P.H.

TITLE: State Surgeon General

DATE: _____

SIGNED BY: _____

NAME: Michael Napier

TITLE: CHD Administrator

DATE: _____

ATTACHMENT I

SEMINOLE COUNTY HEALTH DEPARTMENT

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

<u>Service</u>	<u>Requirement</u>
1. Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3, F.S. 381 and F.S. 384 and the CHD Guidebook.
2. Dental Health	Monthly reporting on DH Form 1008*.
3. Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4. Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5. Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6. Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7. Chronic Disease Program	Requirements as specified in the Healthy Communities, Healthy People Guidebook.
8. Environmental Health	Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
9. HIV/AIDS Program	Requirements as specified in F.S. 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form 50.42A and Pediatric HIV/AIDS Confidential Case Report CDC Form 50.42B. Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628

ATTACHMENT I (Continued)

or Post-Test Counseling DH Form 1628C. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

10. School Health Services

Requirements as specified in the Florida School Health Administrative Guidelines (April 2007).

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

SEMINOLE COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/08	Estimated County Share of CHD Trust Fund Balance as of 09/30/08	Total
1. CHD Trust Fund Ending Balance 09/30/08	1,880,032	1,253,354	3,133,386
2. Drawdown for Contract Year October 1, 2008 to September 30, 2009			
3. Special Capital Project use for Contract Year October 1, 2008 to September 30, 2009	570,000	380,000	950,000
4. Balance Reserved for Contingency Fund October 1, 2008 to September 30, 2009	1,310,032	873,354	2,183,386

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

Pursuant to 154.02, F.S., At a minimum, the trust fund shall consist of: an operating reserve, consisting of 8.5 percent of the annual operating budget, maintained to ensure adequate cash flow from nonstate revenue sources.

ATTACHMENT II

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENERAL REVENUE - STATE						
015040	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015040	ALG/CONTR TO CHDS-AIDS PATIENT CARE	96,000	0	96,000	0	96,000
015040	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STAFF	47,855	0	47,855	0	47,855
015040	ALG/CONTR TO CHDS-DENTAL PROGRAM	0	0	0	0	0
015040	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
015040	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	26,340	0	26,340	0	26,340
015040	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0	0
015040	ALG/CONTR. TO CHDS-MCH HEALTH - FIELD STAFF COST	0	0	0	0	0
015040	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015040	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	9,684	0	9,684	0	9,684
015040	ALG/FAMILY PLANNING	81,476	0	81,476	0	81,476
015040	ALG/IPO HEALTHY START/IPO	0	0	0	0	0
015040	ALG/PRIMARY CARE	124,056	0	124,056	0	124,056
015040	ALG/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015040	CATE - ESCAMBIA	0	0	0	0	0
015040	CHD SUPPORT POSITION	0	0	0	0	0
015040	CLOSING THE GAP PROGRAM	0	0	0	0	0
015040	COMMUNITY TB PROGRAM	69,412	0	69,412	0	69,412
015040	DENTAL SPECIAL INITIATIVE PROJECTS	0	0	0	0	0
015040	DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
015040	ENHANCED DENTAL SERVICES	0	0	0	0	0
015040	FL CLPPP SCREENING & CASE MANAGEMENT	0	0	0	0	0
015040	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0
015040	HEALTHY BEACHES MONITORING	0	0	0	0	0
015040	HEALTHY PEOPLE HEALTHY COMMUNITIES	7,614	0	7,614	0	7,614
015040	HIV/AIDS JAIL LINKAGE PROJECT	0	0	0	0	0
015040	INDIGENT DENTAL CARE - ESCAMBIA	0	0	0	0	0
015040	LA LIGA CONTRA EL CANCER	0	0	0	0	0
015040	MEDIVAN - BROWARD	0	0	0	0	0
015040	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0	0
015040	HEALTHY START MED-WAIVER - CLIENT SERVICES	178,191	0	178,191	0	178,191
015040	PRIMARY CARE SPECIAL DENTAL PROJECTS	20,071	0	20,071	0	20,071
015040	HEALTHY START MED WAIVER - SOBRA	60,044	0	60,044	0	60,044
015040	ALG/IPO HEALTHY START/IPO	438,448	0	438,448	0	438,448
015040	STD GENERAL REVENUE	0	0	0	0	0
015050	ALG/CONTR TO CHDS	2,847,145	0	2,847,145	0	2,847,145
GENERAL REVENUE TOTAL		4,006,336	0	4,006,336	0	4,006,336

2. NON GENERAL REVENUE - STATE

015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	78,667	0	78,667	0	78,667
015010	BASIC SCHOOL HEALTH - CMS TF	22,480	0	22,480	0	22,480
015010	BASIC SCHOOL HEALTH - TOBACCO TF	261,978	0	261,978	0	261,978
015010	HEALTHY PEOPLE HEALTHY COMMUNITIES	5,373	0	5,373	0	5,373
015010	YOUTH SCHOOL & AFTER SCHOOL PROGRAM	104,468	0	104,468	0	104,468
015010	CHRONIC DISEASE PREVENTION PROGRAM	33,000	0	33,000	0	33,000
015010	TOBACCO PREVENTION & CESSATION PROGRAM	53,227	0	53,227	0	53,227
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	74,323	0	74,323	0	74,323
015010	FULL SERVICE SCHOOLS - TOBACCO TF	179,457	0	179,457	0	179,457

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
2. NON GENERAL REVENUE - STATE						
015010	ALG/CONTR TO CHDS-BIOMEDICAL WASTE/DEP ADM TF	11,037	0	11,037	0	11,037
015010	PUBLIC SWIMMING POOL PROGRAM	0	0	0	0	0
015010	SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015010	SUPPLEMENTAL/COMPREHENSIVE SCHOOL HEALTH - TOB TF	0	0	0	0	0
015010	TOBACCO PREVENTION & CESSATION PROGRAM	0	0	0	0	0
015010	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO TF	14,014	0	14,014	0	14,014
015010	YOUTH SCHOOL & AFTER SCHOOL PROGRAM	0	0	0	0	0
015018	Summer Food Program	0	0	0	0	0
015020	CHD SUPPORT	0	0	0	0	0
015020	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DEP ADM	0	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF/DACS	0	0	0	0	0
NON GENERAL REVENUE TOTAL		838,024	0	838,024	0	838,024
3. FEDERAL FUNDS - State						
007000	AFRICAN AMERICAN TESTING INITIATIVE (AATI)	0	0	0	0	0
007000	AIDS PREVENTION	0	0	0	0	0
007000	AIDS SURVEILLANCE	0	0	0	0	0
007000	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	238,159	0	238,159	0	238,159
007000	BIOTERRORISM PLANNING & READINESS	91,548	0	91,548	0	91,548
007000	CHD SUPPORT POSITION	0	0	0	0	0
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	0	0	0
007000	COASTAL BEACH MONITORING PROGRAM	0	0	0	0	0
007000	FGTF/AIDS MORBIDITY	0	0	0	0	0
007000	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	28,125	0	28,125	0	28,125
007000	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007000	FGTF/FAMILY PLANNING-TITLE X	110,990	0	110,990	0	110,990
007000	FGTF/IMMUNIZATION ACTION PLAN	39,642	0	39,642	0	39,642
007000	FGTF/WIC ADMINISTRATION	1,001,975	0	1,001,975	0	1,001,975
007000	FLORIDA PANDEMIC INFLUENZA	32,830	0	32,830	0	32,830
007000	HEALTH PROGRAM FOR REFUGEES	14,748	0	14,748	0	14,748
007000	HEALTHY PEOPLE HEALTHY COMMUNITIES	20,639	0	20,639	0	20,639
007000	HIV INCIDENCE SURVEILLANCE	0	0	0	0	0
007000	IMMUNIZATION FIELD STAFF EXPENSE	0	0	0	0	0
007000	IMMUNIZATION SPECIAL PROJECT	13,134	0	13,134	0	13,134
007000	IMMUNIZATION SUPPLEMENTAL	0	0	0	0	0
007000	IMMUNIZATION WIC-LINKAGES	0	0	0	0	0
007000	IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007000	MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007000	MCH BGTF-HEALTHY START IPO	85,200	0	85,200	0	85,200
007000	PHP LAB CAP - BIOLOGICAL AGENTS 2007-08 - FOCUS C	0	0	0	0	0
007000	PHP LAB CAP - BIOLOGICAL AGENTS 2007-08 - FOCUS D	0	0	0	0	0
007000	PHP-CITIES RESPONSE INITIATIVE	40,000	0	40,000	0	40,000
007000	PHP-CITIES RESPONSE INITIATIVE 2007-2008	0	0	0	0	0
007000	RISK COMMUNICATIONS	0	0	0	0	0
007000	RYAN WHITE	0	0	0	0	0
007000	RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000	RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	35,000	0	35,000	0	35,000
007000	RYAN WHITE-CONSORTIA	0	0	0	0	0

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
3. FEDERAL FUNDS - State						
007000	STD FEDERAL GRANT - CSPS	85,738	0	85,738	0	85,738
007000	STD PROGRAM - PHYSICIAN TRAINING CENTER	0	0	0	0	0
007000	STD PROGRAM INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000	STD PROGRAM-INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000	SYPHILIS ELIMINATION	0	0	0	0	0
007000	TITLE X HIV/AIDS PROJECT	0	0	0	0	0
007000	TITLE X MALE PROJECT	0	0	0	0	0
007000	TUBERCULOSIS CONTROL - FEDERAL GRANT	47,550	0	47,550	0	47,550
007000	WIC BREASTFEEDING PEER COUNSELING	26,844	0	26,844	0	26,844
015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	201,013	0	201,013	0	201,013
015009	MEDIPASS WAIVER-SOBRA	79,950	0	79,950	0	79,950
015075	CHD SUPPORT POSITION	0	0	0	0	0
015075	STATE ENVIRONMENTAL FEES	0	0	0	0	0
FEDERAL FUNDS TOTAL		2,193,085	0	2,193,085	0	2,193,085
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE						
001020	TANNING FACILITIES	15,315	0	15,315	0	15,315
001020	BODY PIERCING/ART	1,800	0	1,800	0	1,800
001020	MIGRANT HOUSING PERMIT	0	0	0	0	0
001020	MOBILE HOME AND PARKS	6,350	0	6,350	0	6,350
001020	FOOD HYGIENE PERMIT	50,250	0	50,250	0	50,250
001020	BIOHAZARD WASTE PERMIT	17,270	0	17,270	0	17,270
001020	SWIMMING POOLS	111,050	0	111,050	0	111,050
001020	PRIVATE WATER CONSTR PERMIT	0	0	0	0	0
001020	PUBLIC WATER ANNUAL OPER PERMIT	0	0	0	0	0
001020	PUBLIC WATER CONSTR PERMIT	5,280	0	5,280	0	5,280
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	0
001020	SAFE DRINKING WATER	0	0	0	0	0
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	275,000	0	275,000	0	275,000
001092	ENVIRONMENTAL HEALTH FEES	0	0	0	0	0
001092	OSDS REPAIR PERMIT	0	0	0	0	0
001092	OSDS PERMIT FEE	0	0	0	0	0
001092	I & M ZONED OPERATING PERMIT	0	0	0	0	0
001092	AEROBIC OPERATING PERMIT	0	0	0	0	0
001092	SEPTIC TANK SITE EVALUATION	0	0	0	0	0
001170	LAB FEE CHEMICAL ANALYSIS	16,000	0	16,000	0	16,000
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
010304	MQA INSPECTION FEE	0	0	0	0	0
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		498,315	0	498,315	0	498,315
5. OTHER CASH CONTRIBUTIONS - STATE						
010304	STATIONARY POLLUTANT STORAGE TANKS	0	0	0	0	0
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	570,000	0	570,000	0	570,000
OTHER CASH CONTRIBUTIONS TOTAL		570,000	0	570,000	0	570,000

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
6. MEDICAID - STATE/COUNTY						
001056	MEDICAID PHARMACY	19,795	28,205	48,000	0	48,000
001076	MEDICAID TB	4,578	6,522	11,100	0	11,100
001078	MEDICAID ADMINISTRATION OF VACCINE	0	0	0	0	0
001079	MEDICAID CASE MANAGEMENT	0	0	0	0	0
001080	MEDICAID OTHER	16,496	23,504	40,000	0	40,000
001081	MEDICAID CHILD HEALTH CHECK UP	43,302	61,698	105,000	0	105,000
001082	MEDICAID DENTAL	543,390	774,239	1,317,629	0	1,317,629
001083	MEDICAID FAMILY PLANNING	6,500	58,500	65,000	0	65,000
001087	MEDICAID STD	8,660	12,340	21,000	0	21,000
001089	MEDICAID AIDS	20,620	29,380	50,000	0	50,000
001147	MEDICAID HMO RATE	0	0	0	0	0
001191	MEDICAID MATERNITY	449,516	640,484	1,090,000	0	1,090,000
001192	MEDICAID COMPREHENSIVE CHILD	37,116	52,884	90,000	0	90,000
001193	MEDICAID COMPREHENSIVE ADULT	4,949	7,051	12,000	0	12,000
001194	MEDICAID LABORATORY	0	0	0	0	0
001208	MEDIPASS \$3.00 ADM. FEE	4,500	4,500	9,000	0	9,000
001059	Medicaid Low Income Pool	0	0	0	0	0
MEDICAID TOTAL		1,159,422	1,699,307	2,858,729	0	2,858,729
7. ALLOCABLE REVENUE - STATE						
018000	REFUNDS	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
ALLOCABLE REVENUE TOTAL		0	0	0	0	0
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE						
	PHARMACY SERVICES	0	0	0	93,560	93,560
	LABORATORY SERVICES	0	0	0	239,258	239,258
	TB SERVICES	0	0	0	11,731	11,731
	IMMUNIZATION SERVICES	0	0	0	826,704	826,704
	STD SERVICES	0	0	0	0	0
	CONSTRUCTION/RENOVATION	0	0	0	0	0
	WIC FOOD	0	0	0	6,243,113	6,243,113
	ADAP	0	0	0	621,351	621,351
	DENTAL SERVICES	0	0	0	0	0
	OTHER	0	0	0	0	0
	OTHER	0	0	0	0	0
OTHER STATE CONTRIBUTIONS TOTAL		0	0	0	8,035,717	8,035,717
9. DIRECT COUNTY CONTRIBUTIONS - COUNTY						
008030	BCC Contribution from Health Care Tax	0	0	0	0	0
008034	BCC CONTRIBUTION FROM GENERAL FUND	0	856,104	856,104	0	856,104
DIRECT COUNTY CONTRIBUTION TOTAL		0	856,104	856,104	0	856,104
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY						
001060	CHD SUPPORT POSITION	0	0	0	0	0

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY						
001077	RABIES VACCINE	0	0	0	0	0
001077	IMMUNIZATIONS	0	300,000	300,000	0	300,000
001077	PERSONAL HEALTH FEES	0	523,175	523,175	0	523,175
001077	AIDS CO-PAYS	0	0	0	0	0
001094	LOCAL ORDINANCE FEES	0	64,800	64,800	0	64,800
001094	ADULT ENTER. PERMIT FEES	0	0	0	0	0
001114	NEW BIRTH CERTIFICATES	0	86,000	86,000	0	86,000
001115	DEATH CERTIFICATES	0	150,000	150,000	0	150,000
001117	VITAL STATS-ADM. FEE 50 CENTS	0	4,200	4,200	0	4,200
001073	Co-Pay for the AIDS Care Program	0	0	0	0	0
FEES AUTHORIZED BY COUNTY TOTAL		0	1,128,175	1,128,175	0	1,128,175
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY						
001009	RETURNED CHECK ITEM	0	0	0	0	0
001029	THIRD PARTY REIMBURSEMENT	0	125,700	125,700	0	125,700
001029	HEALTH MAINTENANCE ORGAN. (HMO)	0	0	0	0	0
001054	MEDICARE PART D	0	0	0	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0
001090	MEDICARE PART B	0	19,800	19,800	0	19,800
001190	Health Maintenance Organization	0	0	0	0	0
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	54,755	54,755	0	54,755
007010	U.S. GRANTS DIRECT	0	0	0	0	0
008010	Contribution from City Government	0	0	0	0	0
008020	Contribution from Health Care Tax not thru BCC	0	0	0	0	0
008050	School Board Contribution	0	0	0	0	0
008060	Special Project Contribution	0	0	0	0	0
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	0	0	0	0
010301	EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010405	SALE OF PHARMACEUTICALS	0	18,000	18,000	0	18,000
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011001	HEALTHY START COALITION CONTRIBUTIONS	0	0	0	0	0
011007	CASH DONATIONS PRIVATE	0	57,133	57,133	0	57,133
012020	FINES AND FORFEITURES	0	0	0	0	0
012021	RETURN CHECK CHARGE	0	0	0	0	0
028020	INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	380,000	380,000	0	380,000
011000	GRANT DIRECT-QUANTUM DENTAL	0	0	0	0	0
011000	GRANT DIRECT-HEALTH CARE DISTRICT PAHOKEE	0	0	0	0	0
011000	GRANT DIRECT-NOVA UNIVERSITY CHD TRAINING	0	0	0	0	0

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2008 to September 30, 2009

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
011000 GRANT DIRECT-COUNTY HEALTH DEPARTMENT DIRECT SERVICES	0	0	0	0	0
011000 DIRECT-ARROW	0	0	0	0	0
011000 GRANT DIRECT-ARROW	0	0	0	0	0
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	655,388	655,388	0	655,388
12. ALLOCABLE REVENUE - COUNTY					
018000 REFUNDS	0	0	0	0	0
037000 PRIOR YEAR WARRANT	0	0	0	0	0
038000 12 MONTH OLD WARRANT	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL	0	0	0	0	0
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	787,169	787,169
BUILDING MAINTENANCE	0	0	0	56,795	56,795
INSURANCE	0	0	0	0	0
UTILITIES	0	0	0	123,035	123,035
GROUNDS MAINTENANCE	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	966,999	966,999
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
EQUIPMENT/VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	9,265,182	4,338,974	13,604,156	9,002,716	22,606,872

ATTACHMENT II.
SEMINOLE COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2008 to September 30, 2009

					Quarterly Expenditure Plan				State	County	Grand Total
	FTE's (0.00)	Clients Units	Services		1st	2nd (Whole dollars only)	3rd	4th			
A. COMMUNICABLE DISEASE CONTROL:											
VITAL STATISTICS (180)	2.85	10,500	30,400		32,211	39,462	27,569	32,820	32,062	100,000	132,062
IMMUNIZATION (101)	13.13	11,600	24,400		256,162	268,276	278,206	287,704	654,209	436,139	1,090,348
STD (102)	14.57	2,300	9,400		209,243	215,864	231,059	213,562	521,837	347,891	869,728
A.I.D.S. (103)	8.60	200	4,500		113,099	158,853	192,615	139,970	380,722	223,815	604,537
TB CONTROL SERVICES (104)	6.48	1,800	10,500		96,375	103,249	111,532	116,511	264,600	163,067	427,667
COMM. DISEASE SURV. (106)	0.11	0	0		0	1,664	2,580	2,593	4,174	2,663	6,837
HEPATITIS PREVENTION (109)	2.85	3,000	5,500		35,538	37,673	40,629	33,523	88,418	58,945	147,363
PUBLIC HEALTH PREP AND RESP (116)	5.89	0	4,000		129,015	120,374	149,332	122,697	521,418	0	521,418
COMMUNICABLE DISEASE SUBTOTAL	54.48	29,400	88,700		871,643	945,415	1,033,522	949,380	2,467,440	1,332,520	3,799,960
B. PRIMARY CARE:											
CHRONIC DISEASE SERVICES (210)	2.65	350	1,400		53,281	66,708	73,317	56,122	149,657	99,771	249,428
TOBACCO PREVENTION (212)	1.88	0	500		31,797	43,682	89,837	45,899	114,729	96,486	211,215
HOME HEALTH (215)	0.00	0	0		0	0	0	0	0	0	0
W.I.C. (221)	25.16	9,920	90,000		339,852	328,820	360,851	333,672	1,363,195	0	1,363,195
FAMILY PLANNING (223)	10.19	1,640	3,254		187,477	180,135	174,622	179,677	433,147	288,764	721,911
IMPROVED PREGNANCY OUTCOME (225)	17.34	1,705	11,350		302,868	419,777	392,862	294,269	997,193	412,583	1,409,776
HEALTHY START PRENATAL (227)	12.50	4,000	40,000		238,863	238,056	266,937	234,556	859,047	119,365	978,412
COMPREHENSIVE CHILD HEALTH (229)	7.07	2,600	5,500		120,777	112,180	110,093	129,410	283,476	188,984	472,460
HEALTHY START INFANT (231)	6.40	1,700	9,500		100,067	103,033	102,791	102,166	208,057	200,000	408,057
SCHOOL HEALTH (234)	6.24	0	740,000		142,661	157,687	228,557	94,057	349,777	273,185	622,962
COMPREHENSIVE ADULT HEALTH (237)	7.98	1,800	2,700		133,410	134,965	134,482	129,919	319,666	213,110	532,776
DENTAL HEALTH (240)	13.69	6,000	35,000		229,315	234,837	260,778	246,191	582,672	388,449	971,121
Healthy Start Interconception Woman (232)	0.00	0	0		0	0	0	0	0	0	0
PRIMARY CARE SUBTOTAL	111.10	29,715	939,204		1,880,368	2,019,880	2,195,127	1,845,938	5,660,616	2,280,697	7,941,313
C. ENVIRONMENTAL HEALTH:											
Water and Onsite Sewage Programs											
COASTAL BEACH MONITORING (347)	0.00	0	0		0	0	0	0	0	0	0
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.50	55	150		8,104	8,511	7,018	8,259	19,135	12,757	31,892
PUBLIC WATER SYSTEM (358)	0.00	0	15		500	500	500	500	2,000	0	2,000
PRIVATE WATER SYSTEM (359)	0.00	0	0		250	250	250	250	1,000	0	1,000
INDIVIDUAL SEWAGE DISP. (361)	6.20	1,100	3,750		107,588	97,799	105,421	126,460	237,268	200,000	437,268
Group Total	6.70	1,155	3,915		116,442	107,060	113,189	135,469	259,403	212,757	472,160
Facility Programs											
FOOD HYGIENE (348)	1.60	250	1,200		23,114	23,127	24,608	22,263	43,112	50,000	93,112
BODY ART (349)	0.00	0	15		578	66	1,356	1,626	3,626	0	3,626
GROUP CARE FACILITY (351)	1.64	460	650		21,295	25,177	24,083	24,091	54,646	40,000	94,646
MIGRANT LABOR CAMP (352)	0.00	0	0		0	0	0	0	0	0	0
HOUSING,PUBLIC BLDG SAFETY,SANITATION (353)	0.00	0	0		0	0	0	0	0	0	0
MOBILE HOME AND PARKS SERVICES (354)	0.12	30	70		2,072	2,073	2,072	2,071	4,288	4,000	8,288
SWIMMING POOLS/BATHING (360)	1.54	600	1,300		25,320	26,212	29,885	30,650	112,067	0	112,067
BIOMEDICAL WASTE SERVICES (364)	0.50	420	440		4,876	6,308	11,565	9,627	20,376	12,000	32,376

ATTACHMENT II.

SEMINOLE COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2008 to September 30, 2009

	FTE's (0.00)	Clients Units	Services	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
C. ENVIRONMENTAL HEALTH:										
Facility Programs										
TANNING FACILITY SERVICES (369)	0.20	70	150	3,266	2,967	2,394	5,242	13,869	0	13,869
Group Total	5.60	1,830	3,825	80,521	85,930	95,963	95,570	251,984	106,000	357,984
Groundwater Contamination										
STORAGE TANK COMPLIANCE (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICE (356)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.00	0	0	0	0	0	0	0	0	0
Community Hygiene										
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
OCCUPATIONAL HEALTH (344)	0.36	0	300	6,426	6,049	6,719	5,621	24,815	0	24,815
CONSUMER PRODUCT SAFETY (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.68	135	340	9,903	10,061	10,834	11,790	22,588	20,000	42,588
RABIES SURVEILLANCE/CONTROL SERVICES (366)	0.00	0	0	0	0	0	0	0	0	0
ARBOVIRUS SURVEILLANCE (367)	0.13	0	0	2,638	1,325	4,187	1,186	5,336	4,000	9,336
RODENT/ARTHROPOD CONTROL (368)	0.11	0	10	1,500	1,500	1,500	1,500	3,000	3,000	6,000
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
AIR POLLUTION (371)	0.00	0	0	0	0	0	0	0	0	0
Group Total	1.28	135	650	20,467	18,935	23,240	20,097	55,739	27,000	82,739
ENVIRONMENTAL HEALTH SUBTOTAL	13.58	3,120	8,390	217,430	211,925	232,392	251,136	567,126	345,757	912,883
D. SPECIAL CONTRACTS:										
SPECIAL CONTRACTS (599)	0.00	0	0	300,000	300,000	350,000	0	570,000	380,000	950,000
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	300,000	300,000	350,000	0	570,000	380,000	950,000
TOTAL CONTRACT	179.16	62,235	1,036,294	3,269,441	3,477,220	3,811,041	3,046,454	9,265,182	4,338,974	13,604,156

ATTACHMENT III

SEMINOLE COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT IV
SEMINOLE COUNTY HEALTH DEPARTMENT
FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Main Facility Concrete Block Health Unit Design 50,269 square feet	400 W. Airport Blvd. Sanford, FL 32773	Seminole County Gov.
Satellite Facility Shopping Center store front 9,750 square feet	132 Sausalito Blvd. Casselberry, FL 32707	Leased by: Seminole County Govt Owned by: The Greater Construction Company 1105 Kensington Park Altamonte Springs FL

ATTACHMENT V
SEMINOLE COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2006-2007	\$ _____	\$ _____	\$ _____ -
2007-2008	\$ 372,905	\$ 248,603	\$ 621,508
2008-2009	\$ 197,095	\$ 131,397	\$ 328,492
2009-2010	\$ _____	\$ _____	\$ _____ -
2010-2011	\$ _____	\$ _____	\$ _____ -
PROJECT TOTAL	\$ 570,000	\$ 380,000	\$ 950,000

SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN

PROJECT NAME: Renovation Ph 2: Dental, EH, Imms, Epi, Safety & Security upgrades, etc.

LOCATION/ ADDRESS: 400 W. Airport Blvd, Sanford, FL 32773

PROJECT TYPE: NEW BUILDING _____ ROOFING _____
 RENOVATION X PLANNING STUDY _____
 NEW ADDITION _____ OTHER _____

SQUARE FOOTAGE: 8,000

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

Architectural and contractor costs for interior renovation of approximately 8,000 square feet of office space within the e Seminole County Health Department at 400 w. Airport Blvd, Sanford, FL 32773. This project will re-organize the existi space into a much more efficient and patient friendly environment for each of the affected departments. In addition, re electrical upgrades and safety improvements will also be accomplished.

ESTIMATED PROJECT INFORMATION:

START DATE *(initial expenditure of funds)*: 10/1/2008

COMPLETION DATE: 8/30/2009

DESIGN FEES: \$ 70,000

CONSTRUCTION COSTS: \$ 785,500

FURNITURE/EQUIPMENT \$ 94,500

TOTAL PROJECT COST: \$ 950,000

COST PER SQ FOOT: \$ 106.9375

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

ATTACHMENT VI

SEMINOLE COUNTY HEALTH DEPARTMENT

PRIMARY CARE

"Primary Care" as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015040) is defined as:

"Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care."

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this contract year:

☒ Comprehensive Child Health (229/29)

☒ Comprehensive Adult Health (237/37)

☒ Family Planning (223/23)

☒ Maternal Health/IPO (225/25)

☒ Laboratory (242/42)

☒ Pharmacy (241/93)

☐ Other Medical Treatment Program (please identify) _____

Describe the target population to be served with categorical Primary Care funds.

Primary Care funds will be used to provide the above services to the uninsured and underinsured residents of Seminole County.

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015040) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HMS.

N/A